

Psychological and social impact of the corona virus disease on girls in a marginalised Odzi community in Zimbabwe.

Memory Matsikure^a, Innocent Sifelani^b, Sifikile Songco^c, Maurice Kwembeya^d, Theresi Sibanda^e
^{a,b,c,d,e} Manicaland State University of Applied Sciences, Zimbabwe

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ABSTRACT

The study explores the psychological and social impact of the corona virus disease (Covid-19) among girls aged between 14 and 19 years in the Odzi community of Mutare District, Zimbabwe. The qualitative research methodology was used and 20 participants were selected using the purposive sampling technique. The Hycner's adapted phenomenological data analysis method was employed and the four dominant themes from the analysis were: Psychological impact of Covid-19 on girls from a marginalised community; Social impact of Covid-19 on girls from a marginalised community; girls' vulnerability in Covid-19 era; and lessening the impact of Covid-19 on girls from marginalised communities. The psychological impact of Covid-19 on the participants was experienced through excessive worry, symptoms of depression, fear, symptoms of anxiety and helplessness. Social impact of Covid-19 was experienced in the form of child pregnancies and marriages; lack of basic necessities; child labour and vending, disrupted education, child-headed families, and death of loved ones. The research revealed that girls from marginalised communities were highly vulnerable during this Covid-19 era. Research findings further suggest psycho-education for parents and caregivers of girls, psycho-social support, provision of virtual learning gadgets, furniture and stationery; food and other basic necessities, establishment of low-cost boarding facilities, intensification of awareness education campaigns on sexual and reproductive health; sustainable income generating projects funding for parents and caregivers of girls from marginalised communities; and aid in the form of amenities, disinfectants, buckets and soap.

KEYWORDS:

Covid-19, impact, girls, Zimbabwean, marginalised community, Odzi community

1. Introduction

The World Health Organisation (WHO) declared the outbreak of the novel corona virus disease (Covid-19) as a public health emergency of international concern on 30 January 2020. Globally, Covid-19 infected millions of people, and many lost their lives (United Nations Zimbabwe, 2020). Zimbabwe's first case was recorded on 20th of March 2020. Cases gradually rose, and some deaths were recorded. In an effort to control the spreading of the pandemic, the first lockdown was executed by the government on 30th of March 2020. Most Covid-19 cases, and deaths, in Zimbabwe were recorded during the second wave of Covid-19, and in early January up to mid-March 2021 when the second lockdown was effected in the country.

The Covid-19 global statistics as of 13 June 2021 were 176,751,526 confirmed cases of Covid-19, 160,802,596 recovered and 3,820,288 deaths; India had 29,510,410 total cases, 8,428 new cases, 374,305 deaths, and 28,162,947 have recovered; Zimbabwe had 39,959 cases 37,004 had recovered and 1,632 deaths, also as of 10 June 2021, a total of 2,156,550,767 vaccine doses have been administered (WHO, 2021).

At the time of this study, the virus was in the third wave with no signals of an ultimate end since the efficacy of the vaccinations being developed is still yet to be established. The Covid-19 pandemic and its aftershocks has had devastating effects for most rural communities and marginalised populations in Zimbabwe (World Vision, 2020b). Girls, especially from the marginalised communities, have felt the impact of this pandemic. The economic instability caused by Covid-19 further created an increased risk for girls with regards to early and child marriages (Haneef & Kalyanpu, 2020). Covid-19 also worsened the standing of girls from marginalised communities since they are customarily susceptible to gender-based violence, teenage pregnancies, child marriages and limited access to education.

Girls, their families and communities experienced health and economic burdens. Actions to control the pandemic such as national lockdowns aggravated existing inequalities, driving girls out of school thereby exposing them to violation of their right to education. Schools typically provide safe places for girls. When they are in school, they are less likely to be forced into marriage and be abused sexually.

At the height of the pandemic, schools were shut down as a measure to stop the spread of the virus posing safety challenges for girls as schools usually provide them with some protection (Bissoonauth, 2020). Since the onset of the pandemic, and loss of the protective buffer, communities, teachers and girls reported increased incidences of teen pregnancies, sexual exploitation and early marriages despite the channels of reporting to the police which were said be difficult to access during the period (World Vision, 2020b). Therefore, not doing anything about such a scenario during this Covid-19 is a violation against the rights of girls from marginalised communities.

With schools and university closures affecting nearly 91% of the world's student population, over 1.5 billion learners had their education disrupted, with the number of girls affected being 743 million globally. During lockdowns, online learning became the main mode of education which required use of virtual learning gadgets such as smartphones.

Boys are 1.5 times more likely to own a phone than girls in low and middle-income countries, and are 1.8 times more likely to own a smartphone that can access the internet (Ahlen, 2020). Hence, the girls from marginalised communities' situation were far worse during the current Covid-19 crisis.

Odzi is a community surrounded by commercial farms, and mines. Odzi community's greater population survive on working in the surrounding farms, gold panning and vending. Most women in that community are single with the majority of girls being double-orphaned, children of sex workers with single mothers involved in prostitution; live with elderly caregivers, from child-headed families and some live in bush boarding-lodgings, that is, they stay by themselves in rented accommodation near the schools because their homes are far away. Such a scenario qualifies Odzi as a marginalised community.

Haneef and Kalyanpu (2020) argue that, crises including public health emergencies affect women, girls, men, and boys in different ways, in a large part, is due to the different roles that society ascribes to people based on their gender. Girls, particularly from marginalised, are more likely to be affected due to their already disadvantaged status.

Of the world's approximately 1.2 billion girls, 600 million are teenagers and they normally endure some difficulties because of their gender (Ahlen, 2020). In addition, due to Covid-19, governments, donors and aid providers have redirected their funding towards Covid-19 prevention from other Sexual Reproductive Health and other Health services. Consequently, girls are less

able to obtain these services (Refugees International, 2020). Yet, girls need more health care services than boys due to their vulnerability. The current paper, therefore, establishes the psychological and social impact of Covid-19 on girls in a marginalised community such as Odzi, considering the situation created by the pandemic in relation to the welfare of such communities.

2. Methodology

The qualitative approach was used to explore the psychological and social impact of Covid-19 on girls in a marginalised community. According to Willing (2008), qualitative researchers are inquisitive about finding out how people understand the world in which they live, and experience events encountered in it. In other words, qualitative research aims to depict and assign meaning to events and experiences, but not try to predict them. An interpretive phenomenological design was used to explore the experiences of the participants in order to establish the impact that Covid-19 had on their lives. Such an approach was appropriate because it helps researchers to identify phenomena as they are perceived by the participants (Lester, 1999). This qualitative approach allowed analysis of the participants' experiences and meanings attached to their thoughts, behaviour and feelings.

Purposively selected (Collins et al., 2000) participants consisted of 20 girls aged between 14 and 19 years of age from the marginalised community of Odzi in Mutare District of Zimbabwe. The participants were all in school and most of them have their school fees paid under the Family AIDS Care Trust (FACT) education assistance programme. The educational level of participants was forms one to six. Participants composed of girls who are single or double-orphaned, children of sex workers; those who live with elderly caregivers, from child headed families and those staying in 'bush' boarding facilities.

Analysis of data was done using the Hycner's (1985) adapted phenomenological process. Five phases were executed namely, bracketing and phenomenological reduction, listening to the interview recordings repeatedly; delineating the codes (units of meaning), clustering of codes (the units of relevant meaning) to form themes, and distinguishing common and unique themes (Groenewald, 2004). Under the first stage of bracketing and phenomenological reduction, the researchers had to put aside any presumptions related to the study in order to make out what emerged from the data, and this helped the researchers to extract the pure phenomena from the participant's viewpoint.

The researchers went on to the second phase whereby recorded interviews were repeatedly listened to in order to develop a holistic sense of the phenomenon. The researchers proceeded to the third stage to carefully analyse the data to make sense out of the text data by picking up the essence of the meaning expressed in words, phrases, sentences, paragraphs, and non-verbal or para-linguistic cues during the interview (Hycner, 1985).

The entire transcript was then coded through segmenting and labelling text to form descriptions and broad themes in the data and a list of codes was created. The next phase involved grouping together similar codes to form themes.

In the fifth phase, researchers identified themes common to most or all interviews and those different were also distinguished. Lastly, general and unique themes were placed back into the overall context from which they emerged. The themes that emerged from the data analysis are presented below.

3. Results

Psychological impact of Covid-19 on girls

Psychological experiences reported by participants included excessive worry, symptoms of depression, fear, symptoms of anxiety and helplessness. The girls under study described having experienced psychological symptoms due to Covid-19. For instance, 80% of the participants experienced some form of worry due to Covid-19 while 40% reported having experienced depression symptoms. Excessive worry was attributed to feeling unsafe since other community members had been diagnosed positive and some even died of Covid-19. Below are the descriptions from the participants who reported having experienced psychological impact of Covid-19 in form of excessive worry:

.... and I was worried and even lost weight because I did not know if anyone from my family would die from Covid-19 since our neighbour who had contracted the disease had died....
(Participant G, 15 years).

Participants also experienced excessive worry due to Covid-19 related symptoms they presented with. For example, 30% of the study participants explained having had such an experience. The following quotation expresses this:

..... I had symptoms of coughing, feeling physically weak, lack of appetite, difficulty in breathing and thought that maybe I had contracted the COVID-19 virus. I thought that maybe I was going to die so young...(Participant A, 14 years).

Findings revealed that the Covid-19 pandemic psychologically affected girls such that they felt sad to the extent of not eating properly. This is indicated by the following typical response:

...I could not properly eat because my mother got sick and as single orphan, I thought my mother would die and I did not know how I was going to survive if I woke up a double orphan, my mother is all I and my sister have... (Participant F, 17 years).

Symptoms of depression were another psychological impact of Covid-19 on girls under study. Due to their already difficult life situation, Covid-19 made it more difficult for the girls to acquire basic necessities such as sanitary ware and food. Such experiences depressed some girls from Odzi. The following quotation reflects this fact:

Since my father and mother are both vendors, the lockdown restrictions meant they could not go and sell goods for them to acquire money for our survival. As days progressed, we ended up without enough food, and I could not even have sanitary ware and it made me so sad. I then lost interest in most activities and spent most of my time alone, sleeping, wondering what would become of us... (Participant H, 14 years).

Other psychological experiences from this study revealed that fear was widespread. All participants, 100% indicated that they experienced great fear of the Covid-19 due to its nature of transmission. This is evidenced by the following responses from the study participants:

As the number of Covid-19 death-related cases increased, I was afraid even when I was sent to fetch supplies at the shopping centre because I was scared I could contract the virus... (Participant E, 17 years).

When schools remained closed for long, I became afraid that maybe this Covid-19 situation was never going to end. I was also afraid that I might be forced to get married early by my relatives before completing my A Level since I am a double orphan. I was not sure if they would continue taking care of me due to economic hardships encountered when lockdown regulations were implemented... (Participant L, 19 years).

It is common in marginalised communities in Zimbabwe for orphaned and vulnerable girl children to be married off whenever an economic crisis arises. This in turn triggers fear in such girl children during pandemics such Covid-19 with its negative effects on human life. The fear of harm, caused by the virus itself, alongside the implications for other societal spheres, such as family, education, work and social interaction can have far-reaching effects (Plan International, 2020). The study also established that fear, associated with Covid-19, was great

for girls because their already disadvantaged situation would worsen due to economic hardships faced by relatives looking after them.

Due to the Covid-19 pandemic, girls from marginalised communities also experienced symptoms of anxiety as a psychological impact. For instance, eighteen (90%) of the participant girls reported being anxious about their future and education. This was revealed in feelings of distress, nervousness and misery. Such experiences are illustrated in the following interview responses from the participants:

I felt nervous, and miserable, because schools continued to be closed for a long time and I was afraid that I might not get a chance to complete my education because I want to become a lawyer...
(Participant J, 19 years).

What was distressing most is the idea that Covid-19 might never end, and I thought what if all my relatives end up dying? Who would take care of us the children because it is said Covid-19 mostly kill adults...(Participant P, 16 years).

Symptoms of anxiety were mostly likely to be experienced by the girls from because pandemics such as the Covid-19, mostly affect their way of life than it would affect girls from affluent communities because they are already vulnerable considering their living conditions of abject poverty. In a survey carried out by Plan International (2020), in the 14 surveyed countries, it was apparent that most girls, and young women, have experienced high levels of anxiety as a result of the crisis. The current research findings indicate that girls from marginalised communities experienced symptoms of anxiety in being nervous, miserable and distressed because most girls do not get a chance to attain an education as such losing adult relatives would further worsen their already vulnerable situation. This had the potential to shutter their dreams of ever attaining a better education or life.

Participants also reported having experienced helplessness. At least 45% of the participants reported to having experienced helplessness as a psychological impact of Covid-19. Such experiences were triggered by Covid-linked illness or deaths of caregivers or a loved one. The following quotation reveal this psychological impact of Covid-19:

I felt helpless when my aunt, who was my caregiver got sick from the Covid-19 virus. She had been taking care of me since I was a little girl because both of my parents died when I was only 3 years old from a car accident. My beloved aunt then died on 10 January 2021. I felt very vulnerable and powerless after my aunt's death. She was the only person who had ever taken care of me and people were afraid to come near me during her funeral. I nearly killed my self but our church pastor and his

wife comforted and gave me emotional support. My other relatives live in Marondera and Harare so I am currently staying with the pastor and his wife so that I may write my O level exams this year. I still feel apprehensive when I try to think about whether other relatives will take care of me after my O Levels like my late aunt used to (Participant D, 17 years).

The above finding reveals that girls from marginalised communities are already in a disadvantaged situation worsened by the Covid-19 which indeed had a greater psychological impact on their well-being as they face uncertainty about their future. Unlike girls from affluent families who normally do not have to worry about their upkeep after losing parents or caregivers, girls in Odzi have a mammoth task before them. In addition to their already vulnerable circumstances, these girls had to further deal with effects of pandemics such as Covid-19.

Social impact of Covid-19 on girls

Current research findings reveal that the social impact of Covid-19 on girls from marginalised communities were manifested in different forms such as lack of basic necessities, child labour and vending; child pregnancies and marriages; disrupted education, child-headed families, and death of loved ones.

Participants reported having been affected socially by Covid-19 through lack of basic necessities of life such as food and money to acquire goods and services leading to their starvation. Poor communities struggle to acquire the basic necessities of life such as food and other goods. The Covid-19 pandemic worsened the situation of girls living in such communities. For example, 100% of the participants reported to having experienced lack of basic necessities one way or the other due to Covid-19 lockdowns and movement restrictions. The following statements by participants confirm this fact:

We had to beg for food from farmers from nearby farms. They gave us green mealies and pumpkin. We went for 3 weeks without eating Sadza (The staple food). It was really a difficult time for us because when school finally opened, we could not get new uniforms and stationery because business was low for my father who is self-employed... (Participant R, 17 years).

Since my mother is a vendor, we could not get enough supplies and food during lockdown and we had to source from neighbours. Then GOAL, a non-governmental gave us food 3 times a week (Participant B, 16 years).

This research finding indicates that girls from marginalised experienced more food security challenges in this case aggravated by the advent of the Covid-19 pandemic. The girls' parents and caregivers' sources of income such as vending as indicated in these findings were not be enough to provide

adequately for them under normal circumstances, worse in times of a crisis. This finding concurs with the speculation that the coronavirus pandemic could see the number of people suffering from acute food insecurity doubling from 135 to 265 million (World Food Programme, WFP, 2020).

From the research, child labour and vending were another social impact of Covid-19 among girls under study. This is evidenced by the fact that 90% of participants reported as having had gone and sold their labour for artisanal miners in the area since the illegal mining activities were open during Covid-19 lockdown period. This is detected from the following quotation:

My mother got sick due to Covid-19, and my young brother, sister and myself had to do a lot of chores at home. I had to go to the mining sites to sell drinks and buns so as to get money for our domestic supplies since mother was not feeling well (Participant N, 15 years).

The above finding indicates that the girls had to do a lot of work during this Covid-19 crisis. Thus, due to extreme poverty caused by this pandemic, girls from marginalised communities are among millions of children pushed into child labour (De Hoop & Edmonds, 2020). The above finding reveals that even though generally children worldwide were expected to be pushed into child labour due to the Covid-19 pandemic, girls from a marginalised community would end up in addition to household chores having to engage in selling goods at more risky areas such as mining sites where conditions are usually unhygienic which would expose them more to contracting the deadly virus.

Participants conveyed that Covid-19 also led to child pregnancies and early marriages. All of the participants, 100%, reported that a lot of girls got pregnant and some ended up in child marriages due to Covid-19. The following statements from participants reveal this fact:

Some, of the girls I went to sell goods at mining sites with ended up getting pregnant and got married to the gold miners. Therefore, they did not return to school after lockdown.... (Participant T, 16 years).

About three quarters, that is out of 20 girls who came to Odzi High School from Transau, 15 got pregnant or married during this Covid-19 era. Now, we are only 5 girls from Transau coming to school. This is very sad because these girls did not get the opportunity to complete their education (Participant C, 15 years).

From the above, the girls from Odzi community were socially affected by Covid-19 leading to child pregnancies and marriages that occurred mostly in mining sites worsening the already vulnerable girls' situation. These findings show that mining areas were a source of child marriages and teen pregnancies

during this Covid-19 period. Therefore, girls from marginalised communities were more vulnerable during Covid-19 period when they have to engage in selling of goods for various reasons associated with the pandemic and they become prey to gold miners who take advantage of their vulnerability and make them child brides or pregnant. It is projected that as many as 13 million extra child marriages will occur in the years immediately following the crises, with at least 4 million more girls married in the next two years (World Vision, 2020b) These findings concur with research findings in some school catchments where Case Care Workers are particularly vigilant. Up to a quarter of girls who started Form 4 in 2020 have been reported to be pregnant since schools opened earlier that year (Ahlen, 2020).

Participants reported of disrupted education as another social impact of Covid-19 on girls from marginalised communities. For instance, 90% of the participants indicated that girls from their community had their education greatly disrupted by the Covid-19 pandemic. The following were some of the statements by the participants:

When months passed and schools were still closed, I had read all the notes that our teachers gave us from January up to 24 March 2020 when schools closed and finished. I had nothing new to read since I do not own any textbooks. To make matters worse I could not attend online lessons because no one has a smart phone in my family. This greatly affected my education such that when we came back to school in November, I did not perform well in most of the tests we wrote (Participant I, 18 years).

During the first Covid-19 lockdown, in 2020, I was in grade 7. The lockdown affected me very much because we were not going to school. Our teachers did not conduct on-line lessons because the school could not afford to buy data bundles for them. As a result, we did not cover most of the syllabus for all subject and when I sat for my Grade 7 exams in December, I obtained poor grades (Participant S, 14 years).

Even though the Covid-19 pandemic has led to school closures in 191 nations and 1.5 billion pupils are estimated to be out of school, of which 740 million are girls (Albrechtsen & Giannini, 2020; Plan International, 2020a), the girls from marginalised communities were more disadvantaged because they could not afford reading material or online lessons and radio lessons like other girls and children from more affluent communities. This is due to lack of own textbooks and lack of virtual learning gadgets.

Of the participants, 25% reported that Covid-19 led to child-headed families in their communities as a social impact. The following is a statement from one of the participants which support this fact:

Our mother went to South Africa where our father works and when lockdown was effected, she could not come back home. We had to stay without a parent-figure for about 6 months. I and my 11-year-old sister had to work for our food and we had to go and clean houses and wash clothes for some people in our community for us to get food to eat and other household supplies (Participant B, 16 years).

These findings reveal that girls, especially from vulnerable communities ended up surviving under child headed family conditions when parents could not travel back home due to the Covid-19 lockdown regulations, and this placed such girls at a higher risk of being exploited and abused due to their already delicate situation of lacking they would not survive for long without having to find means, and ways of acquiring food and other necessities.

Participants, 20%, also indicated that the death of loved ones was another social impact caused by the Covid-19. The following quotation reveals that death of loved ones was one social impact of Covid-19 on girls from the marginalised community:

My father worked in Mutare. When he got sick they took him to the hospital where he was diagnosed of Covid-19 virus. They put him on medication and oxygen but still he did not make it. Now we only have mother who is not employed as the only caregiver. Now she has to take piece jobs in order to fend for us. I really miss my father (Participant K, 15 years).

Losing a loved one had a more bearing on girls from marginalised communities due to the fact that their opportunities in life are mostly limited hence, the death of a bread winner meant that their lives became more difficult for all spheres of their livelihoods. The girls from the marginalised community were affected socially in various forms as revealed by study findings discussed above. Such experiences had a great bearing on their welfare due to their disadvantaged situation whereby they already cannot afford a decent living which has been made even harder by the Covid-19 pandemic. This shows that the Covid-19 has had an impact on the lives of girls from marginalised communities worsening their already susceptible status.

Girls' vulnerability during Covid-19 era

Study participants (100%) considered girls from marginalised communities to be highly vulnerable during this COVID-19 era. The following statement reveals the circumstances which confirms the vulnerability of such girls during this Covid-19 era:

Girls are actually vulnerable during this COVID-19 era because they are mostly the one to do most household chores and they are exposed to handling equipment and surfaces that may lead them to contracting the virus. When the girl child goes to fetch water from the borehole, she may touch a surface touched by someone infected by the virus because most caregivers do not even afford sanitisers and most girls go to fetch water without masks Participant M, 18 years).

Girls become vulnerable especially since they do most of the household chores meaning that if a family member gets sick, they contribute in taking care of the sick member as they carry out day to day household chores such as cleaning, washing and so on. Of the participants, 65% of the participants stated that girls are vulnerable during this Covid-19 era because they are sometimes compelled to go to places which puts them at risk. This is revealed in the following quotations:

The girl child is not protected during this Covid-19 era because when they go to mining sites to sell goodies to gold artisanal miners, they get exposed to the virus because people at the mining sites do not wear masks or maintain any social distance. The water found in these sites is usually dirty and not suitable for hand washing (Participant D, 17 years).

Some school girls who rent in the Odzi location because their homes are far away from secondary schools tend to entertain some gold miners during the nights so that they get extra cash for foodstuffs and other nice things are vulnerable to Covid-19, HIV STI's, child marriages and even teenage pregnancies (Participant T, 16 years).

Places such as mining sites and shebeens exposed the girls to the Covid-19 virus and other forms of abuse. This makes life difficult for the girl children and due to their poor background, they get exposed to life threatening settings. This research finding concurs with another research carried out in Chivi where community facilitators have reported cases of girls now targeted by illegal gold miners' due to their vulnerability and quest for quick means of survival (World Vision (2020b). Therefore, it is evident that family income impact on child marriage for the poorer populations (UNFPA, 2020).

Of the participants, 80% stated that girls are vulnerable during this Covid-19 era because even in some business centres, schools and market places Covid-19 regulations were not observed. Girls are mostly at risk because they are the most vulnerable because they do most chores and are more likely to be send on errands than boys. The following quotation from a participant supports this notion:

We wear masks at school but we sometimes have to share desks. We only have one mask each and therefore cannot change until the end of the day. Also, there are no hand washing points at classrooms entrances. We only wash our hands or use sanitizer at the school gate. In shops we only get sanitised

at the entrance and in queue for paying for the goods social distance is not maintained. Even in market places some sell to you with their masks down.... (Participant R, 17 years).

However, 20% of the participants indicated that some measures to protect girls from being susceptible during this Covid-19 era were being taken: The following statement show this view:

I think girls are being protected because we were given one mask each by the school and we wash our hands at the school gate and at some shops' entrances.... (Participant H, 14 years).

Washing or using sanitisers only at entry points of schools, shops or markets exposes the girls to contracting Covid-19. Of the participants 65%, believed that girls are vulnerable during this Covid-19 era because of some religious belief which do not allow them to seek medical attention from health centres or even take local herbs such as *Zumbani*. The following quotation reveal this view:

I think the girls are vulnerable during this Covid-19 era because of some church beliefs which prevents them from going to hospitals and clinics where they could be tested and receive medication for Covid-19 and some churches do not approve use of herbs such as Zumbani and other indigenous herbs which are said to help in treating Covid-19.... (Participant J, 19 years).

These findings show that religious beliefs contribute to girls' vulnerability and indicate that girls are highly vulnerable during this Covid-19 era. In such circumstances girls are more expected to abide by regulations and would be more closely monitored than boys. Moreover, being female, they are more susceptible to contracting the virus as they take care of most chores and get in contact with most surfaces.

Lessening the impact of Covid-19 on girls

Of the participants 75% suggested the need for psycho-education for their parents and caregivers to be trained in how to help their girl children deal with stress, anxiety, grief, and worry associated with disasters such as the Covid-19 pandemic. Also, the need for psycho-social support for the girls was suggested. The following statements reveal such notions:

Our parents do not understand what we go through and how we feel as a result of such a serious disease. I think the parents need to be taught how to help us in difficult times like these (Participant P, 16 years).

There is also need for psycho-social support groups for girls affected by Covid-19 whether through death of a parent or caregiver, those who have been sick and all experiencing fear and anxiety because of this pandemic (Participant J, 19 years).

Psycho-education of parents and caregivers to support children in these difficult times and build their resilience is imperative so that they emotionally connect with children, understand their concerns so as to prevent and lessen incidences of abuse (UNICEF, 2020). Of the participants, 80% of the participants indicated that Awareness Education campaigns on Sexual Reproductive Health should be intensified. The following statement show this notion:

Before Covid-19 Youth Alive Zimbabwe used to come and teach us on Sexual Reproductive Health, Life Skills and our rights and responsibilities but now they are not coming. I think if such programmes continue, they will help the girls from this community to be alert and be more responsible and then become less vulnerable (Participant F, 17 years).

The aforesaid indicates the need for the providers of Sexual Reproductive Health and Life Skills like the Ministry of Primary and Secondary education and their partners from the civic society, to intensify such programmes so as to lessen the vulnerability of girls and enhance resilience in girls from marginalised communities during this Covid-19 era.

The following statement shows the strategy which 90% of the participants indicated will lessen the impact of Covid-19 on girls from marginalised communities:

Girls from poor backgrounds should be provided with laptops, tablets and smart phones and stationery so that they get access to virtual learning. Schools should provide more desks and ask for help from donors or the government if they cannot afford to buy so that learners do not have to share desks. Schools should come up with projects which will help generate money for data bundles so that when it becomes necessary for lockdown since COVID-19 is still there, girls may be able to benefit from on-line lessons (Participant M, 18 years).

This finding points to the view that effort should be made to provide girls from marginalised communities with virtual learning gadgets and stationery so that attaining education becomes possible for them also just like girls from affluent communities. The issue of learners having to share desks should be taken seriously and measures should be implemented to put an end to such a scenario. This calls for the civic society and the government to provide funding so that schools from marginalised communities get enough desks for their learners in order to lessen the impact of Covid-19 on girls from such communities.

At least 75% of the participants were of the view that more food and other basic necessities support should be provided to lessen the impact of Covid-19 on girls from marginalised communities. The following quotation supports this view:

More help in form of food and other basic necessities such as sanitary ware should be provided by NGOs and the government so that we get enough food during lockdown because our parents who are self-employed will not be able to provide enough during such periods... (Participant F, 17 years).

The above supports the view that during crises such as Covid-19, it is of great importance that sustenance is provided to girls in marginalised communities since their parents or caregivers mostly engage in self-employment, and piece jobs as sources of income to fend for their families. Data indicates that only 10% of the African population and 16% of children are covered by some form of social protection (Beegle et al., 2018; UNICEF, 2020). This points to the need for the civic society and government departments to source for food and other basic necessities to be distributed to marginalised communities so that girls from these communities become less exposed to the impact of Covid-19.

Almost 70% of the participants identified the need for a low-cost boarding facility and for the law enforcers to be more vigilant and monitor activities at mining sites during this Covid-19 era since mining is one of the major economic activities in Odzi area. The following quotations reveal this view:

A boarding school should be started here in Odzi since most learners', both girls and boys, homes are far away. They come here for secondary education. Their parents pay rent for them in the Odzi location but girls in this situation mostly end up having sexual relationships especially with miners who give them few United States dollars. This exposes the girl child especially this Covid-19 era.... (Participant L, 19 years).

The above shows that girls in Odzi community who live in bush boarding end up being taken advantage of by miners since the area is surrounded by mining activities, and since the girls will be living on their own, they end up engaging with such men for money to buy food stuffs. Funding could be sourced from donors for the purpose of building infrastructure to house the learners. The school may come up with projects such as growing of vegetables, maize or small poultry projects so that learners staying in the Low-cost boarding facility may get food supplies at affordable prices. This would go a long way in protecting girls from marginalized communities from impact of pandemics such as the current Covid-19. It was indicated that:

The police should monitor what takes place at mining sites because girls under age are sent there to sell goodies without masks and no one there puts on masks and no sanitizers or even water hand washing. Girls end up being impregnated by the illegal gold miners and they end up in child marriages (Participant G, 15 years).

The above shows the need for police to be more vigilant in mining sites so that girls from such marginalised communities who are mostly under age will not be found in such areas and all perpetrators of illegal mining and child marriages should be apprehended by the law. Moreover, the establishment of a low-cost boarding school even at the already existing Odzi High School may help in reducing girls' vulnerability especially in times like this current Covid-19 era.

All participants, 100% believe that aid in the form of sanitisers, disinfectants, buckets and soap will put the girls in marginalised communities at risk during this Covid-19 era. The following statement clarifies this view:

If our schools get help of sanitisers, disinfectants, soap and buckets so that we may have hand washing points at the entrances of our classrooms. Even our teachers should be provided with sanitisers so that when they mark our books, they use it so that we would not get the virus when our books are returned after marking (Participant A, 14 years).

Most schools from marginalised communities cannot afford to buy enough PPE for their schools so it will be ideal if help with sanitisers, disinfectants, soap and buckets may be given to them so that the girls from the marginalised communities will be protected from the impact of Covid-19.

A participant stated the need for more sustainable income generating programmes for parents and caregivers of girls from marginalised communities. The following quotation supports this indication:

If our parents get help for projects that may help them to take care of us then girls would not be lured by money from illegal gold miners and they would not have to go to mining sites where they are exposed to contracting the Covid-19 virus and sexual activities which results in teenage pregnancies and child marriages (Participant P, 16 years).

This research evidence suggests that there should be more effort from the government, local government and civic society to source funding and come up with more sustainable income generating projects taking into consideration local resources so that parents and caregivers of girls from marginalised communities will be able to provide for their children thereby lessening the exposure of these girls to the impact of Covid-19. Furthermore, only 5.6% of unemployed persons in Africa are covered by social protection (ILO, 2020).

4. Conclusion

This research study concluded that girls from marginalised communities experienced Covid-19 impact in various forms. The psychological impact of Covid-19 on the participants were experienced through excessive worry, symptoms of depression, fear, symptoms of anxiety and helplessness. These psychological impacts experienced by girls from Odzi were mostly due to their already disadvantaged status which was aggravated by the Covid-19 pandemic. Social impact of Covid-19 was manifested in form of lack of basic necessities; child labour and vending, child pregnancies and marriages, disrupted education, child-headed families, and death of loved ones.

The research also concluded that girls from marginalised communities were highly vulnerable during this Covid-19 era. Therefore, the research concluded that the following measures will go a long way in lessening the impact of Covid-19 on girls from marginalised communities: Psycho-education for parents and caregivers; psychosocial support including counselling; Intensification of Sexual and reproductive education campaigns; provision of virtual learning gadgets; furniture and stationery; food and other basic necessities aid during lockdown; establishment of low cost boarding facility; funding for sustainable income generating projects for parents and caregivers of girls from marginalised communities; and aid in the form of sanitisers, disinfectants, buckets and soap.

The research also concluded that peculiar to girls from marginalised communities are the psychological and social experiences such girls went through including having to deal with effects of Covid-19 such as symptoms of depression, symptoms of anxiety, excessive worry, lack of necessities and others mentioned above in an environment of deprivation which made their situation worse than that of girls from more affluent backgrounds.

Therefore, the girls from marginalised communities were psychologically and socially affected by Covid-19 and ended up becoming child brides, pregnant, child vendors, living in child-headed families, felt helpless and had their lives disrupted mainly due to their vulnerable status. Illegal gold mining sites made the girls susceptible, among other factors, to sexual abuse and the Covid-19 virus.

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